## **CAMPAIGN FINANCIAL DISCLOSURE STATEMENT**

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR C	OMMITTEE			
October 11,2010		de B		,		
2.b. IF COMMITTEE, NAME OF CANDIDATE		)	-	3. ELECTION DATE		
				august	5,2010	
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		Otete	~		
- 1	•	7/ .//	State	Zip Code	Phone	
4.b. CANDIDATE'S HOME ADDRESS (if differen	t than 4.a.)	hattan	poga	TN 37416	423-344-8221	
Street or Rural Route	City		State	Zip Code	Phone	
5. OFFICE SOUGHT (include district number, it	f applicable)	6. NAME C	F POLITICA	AL TREASURER (may be	e candidate)	
County Mayor			Lamo	en McDa	niel	
7. CATEGORY OR REPORT (Check one)  FIRST SECOND THIRD  QUARTER QUARTER QUARTER  8.a. BEGINNING DATE OF REPORTING PERIOD	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERA		YEAR-END SUPPLEMENTAL	
-,		_		PORTING PERIOD		
9. (Check one)		Sep	teme	n 30, 201	0	
<ul> <li>a.  This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.)</li> <li>b.  This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.</li> </ul>						
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code.  Signature of candidate  date  signature of political treasurer  date						
11. WITNESS SIGNATURE						
Charlette Mullis-Morgan signature of witness	/ <i>Q~/(~/</i>	<u>C</u>	Harfell sig	gnature of witness	/0-//-/ date	
12. SUMMARY						
a. BALANCE ON HAND LAST REPORT				\$ <u>49752.</u>	24	
b. TOTAL RECEIPTS THIS PERIOD				\$	<u> </u>	
c. TOTAL DISBURSEMENTS THIS PERIOD .				s /2 237.	72	
d. BALANCE ON HAND (12.a. plus 12.b. n	ninus 12.c.)				\$ 37 514.82	
e. TOTAL LOANS OUTSTANDING	11 - 11 - 11	130 0102			\$0	
f. TOTAL OBLIGATIONS OUTSTANDING						

## **SUMMARY PAGE - CANDIDATE**

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD				
Claude Kamsey	FROM: 7/1/10 TO: 9/30/10				
RECEIPTS  15. CONTRIBUTIONS (other than loans and interest)					
a. Unitemized Contributions (\$100 or less from each source this period)	\$				
b. Itemized Contributions (over \$100 from each source this period)	\$				
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$				
16. LOANS RECEIVED THIS REPORTING PERIOD					
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$ <u>O</u>				
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$				
DISBURSEMENTS					
19. EXPENDITURES (other than loan payments)					
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	.g., printing, postage, gasoline)				
adventising \$ 50.0	20				
Bank Service Charge \$ 15.0	00				
Donation \$ 390.					
Flowers \$ 85.	00				
Food \$ 134.	70				
Postage \$ 88	.00				
\$					
\$					
\$					
Total of Expenditures (\$100 or less each payee)					
b. Itemized Expenditures (Over \$100 each payee this period)					
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)					
20. LOAN REPAYMENTS MADE THIS PERIOD\$					
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)					
22.IN-KIND CONTRIBUTIONS					
a. Unitemized in-kind contributions (\$100 or less from each source this period)\$					
b. Itemized in-kind contributions (over \$100 from each source this period)\$					
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$					
23. OBLIGATIONS					
a. Unitemized Obligations Outstanding (\$100 or less each)\$					
b. Itemized Obligations Outstanding (Over \$100 each)\$					
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$					



## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

				ING THE PERIOD		
Claude Bamsey FROM: 7/1/10				TO: 9/30/10		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount *					
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name  Mike Evatt fon School Board  Address  5209 Mona Fee Kane		donation		500.00		
City OoHewan	State	-				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name						
Visa		Office ed	unment			
Address P. O. Box 660348		Office egupment		942.06		
City Dallas	State   Zip Code	-				
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Sherrill's		mcDaniel				
Address		D. I.				
S16 Chicka mauga	State Zip Code	Building		700.00		
Rossville	State Zip Code 6A 30741	Dedication				
First Name Dennis	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name						
Massengale		Entertainn	ent			
4109 Ringgold Road		Entertainment For reception		250.00		
City P. d	State Zip Code	Sort masquire				
East Ridge	TN 37412					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name Nonthwest Georgia Bank Foundation		donation				
Address 5063 alabama Highway		0000000		250.00		
City Ringgold	State Zip Code  9a 30736					
First Name	Middle Name	Purpose of Expenditure		Amount of Expenditure		
Last Name/Business Name						
Alhambra Shrine Circus  Address 1000 a Lhambra Drive		adventising		125.00		
City Chattanooga	State Zip Code					
	/N 37421					
<ol> <li>TOTAL ITEMIZED EXPENDITURES         (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must     </li> </ol>						

## ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVER	RING THE PERIOD	
Claude Bamsey FROM: 7/1				FROM: 7/1/10	TO: 9/30/10	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount 2 76 7. 06	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)						
First Name Jean	Middle Nar	me	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address SIB Tinker hell Circle City Flintstone State GA 30725		Election Night		540.00		
City Flintstone	State 6 A	Zip Code 30725	Election Night Reception			
First Name	Middle Nar		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name	.ast Name/Business Name		-			
Bamsey		Reimbursement for				
Address 7004 River Run Drive		election no	shr	200.30		
Chatunooga	State TV	Zip Code 37416	Reimbursement for election night reception			
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code	-			
First Name	First Name Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
First Name	Middle Name		Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name						
Address						
City	State	Zip Code				
5. TOTAL ITEMIZED EXPENDITURES	500.00					
(Carry forward to item 3. of next page if additional pages	s of this form a	are used.)				
(If this is the last page of expenditures, this amount mus	t be shown in	item 19b. of summary.)			3507.36	